

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

MasterCard International Inc. Employees' PAC

ADDRESS (number and street) ▼

2000 Purchase St.

☐ Check if different than previously reported. (ACC)

Purchase

NY

10577

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00410274

3. IS THIS REPORT

☒

NEW (N)

OR

☐

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☒ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
07 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
07 31 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Althea Hutchinson

Signature of Treasurer

Althea Hutchinson

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
08 19 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

MasterCard International Inc. Employees' PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y 07 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y 07 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> 2015		80181.78
(b) Cash on Hand at Beginning of Reporting Period.....	134887.57	
(c) Total Receipts (from Line 19) .....	16961.66	152544.96
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	151849.23	232726.74
7. Total Disbursements (from Line 31) .....	5919.65	86797.16
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	145929.58	145929.58
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

MasterCard International Inc. Employees' PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y  
07 01 2015

To:

M M / D D / Y Y Y Y  
07 31 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

15656.66

131487.96

(ii) Unitemized .....

1305.00

21057.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

16961.66

152544.96

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

16961.66

152544.96

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

16961.66

152544.96

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

16961.66

152544.96

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	269.65	2147.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	269.65	2147.16
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5650.00	84650.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5919.65	86797.16
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5919.65	86797.16

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	16961.66	152544.96
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	16961.66	152544.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	269.65	2147.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	269.65	2147.16

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Rick Allen**

Mailing Address 200 Bellevue Pkwy  
Ste 500

City State Zip Code  
Wilmington DE 19809-3741

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Member Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 08 / 2015

**Transaction ID : 04692AF7-B874-4554-**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Sheryl Andrasko**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
O Fallon MO 63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Information Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : 20150710-15-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Kimberly Attard**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
O Fallon MO 63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Business Leader, Systems Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : 20150710-16-18-52**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Tim Berger**

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MasterCard

Group Executive, Tax

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : 20150710-29-18-52**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Vijay Bhuvanagiri**

Mailing Address 2200 Mastercard Blvd

City

State

Zip Code

O Fallon

MO

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MasterCard

SBL Enterprise Architecture

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

850.00

Date of Receipt

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : 20150710-75-18-52**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Tj Birkel**

Mailing Address 1401 I St NW  
Ste 2

City

State

Zip Code

Washington

DC

20005-2225

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MasterCard

Bus. Leader, Public Policy

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

400.00

Date of Receipt

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : 20150710-10-18-52**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

550.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 39

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Douglas Black**

Mailing Address 2647 Washington St NE

City

Minneapolis

State

MN

Zip Code

55418-2832

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Sr. Managing Consultant - 500002

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-41-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Chris Bond**

Mailing Address 140 Keswick Way

City

Alpharetta

State

GA

Zip Code

30022-6315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Global Solutions Leader, Account Manag

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2015

**Transaction ID : 4C2B83B71B48BD7EC4EC**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Ed Brandt**Mailing Address 200 Bellevue Pkwy  
Ste 500

City

Wilmington

State

DE

Zip Code

19809-3741

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

General Manager, Chase

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-26-18-52**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

350.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

## **A. Angie Buss**

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-95-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Jim Carrington**

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Global Product Group Executive, Global

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1575.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-8-18-52**

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

## **C. Kevin Carroll**

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Product Management

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-102-18-52**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

425.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 39

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Joe Casale**

Mailing Address 100 Manhattanville Rd

City	State	Zip Code
Purchase	NY	10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Business Leader, Product Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

**Transaction ID : 20150710-30-18-52**

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B. Jr Caughey**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Finance Leader, Financial Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

**Transaction ID : 20150710-115-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Ben Colvin**

Mailing Address 100 Manhattanville Rd

City	State	Zip Code
Purchase	NY	10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Global Practice Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2700.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	8		2	0	1	5

**Transaction ID : A564CEE9-DEE2-41B5-**

Amount of Each Receipt this Period

2700.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

2875.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 39

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Patricia Costanzo**

Mailing Address 100 Manhattanville Rd

City	State	Zip Code
Purchase	NY	10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Global Solutions Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

**Transaction ID : 20150710-42-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Elyse Cuttler**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Corporate Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

**Transaction ID : 20150710-51-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Diane Dann**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	5

**Transaction ID : 20150710-54-18-52**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

250.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Colm Dobbyn**

Mailing Address 2000 Purchase St

City State Zip Code  
 Purchase NY 10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

SVP/Asst. General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : 20150710-53-18-52**

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

**B. Patricia Docherty**

Mailing Address 2000 Purchase St

City State Zip Code  
 Purchase NY 10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Human Resources

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : 20150710-44-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Seth Eisen**

Mailing Address 2000 Purchase St

City State Zip Code  
 Purchase NY 10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Senior Business Leader, Public Relatio

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : 20150710-90-18-52**

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

375.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 13 OF 39  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Michael Ellison**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-68-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Tom Fauth**

Mailing Address 311 Briartree Ln

City	State	Zip Code
Saint Louis	MO	63129-5015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Business Leader, Business Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2015

**Transaction ID : 4223A62BD1C40DAD8C0F**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Gary Flood**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

EVP/Customer Group

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-97-18-52**

Amount of Each Receipt this Period

416.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

566.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 39

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Marianne Fogarty**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Business Leader, Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	02	/	2015

**Transaction ID : 20150710-120-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Tucker Foote**Mailing Address 2020 12th St NW  
Apt 704

City	State	Zip Code
Washington	DC	20009-7591

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 40EDA420999A855CA6BE**

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**C. Betsy Foran-Owens**

Mailing Address 100 Manhattanville Rd

City	State	Zip Code
Purchase	NY	10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Product Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	09	/	2015

**Transaction ID : 32D1B297-5EE3-4A2A-**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

825.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 39  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

## **A. Nichole Francis Reynolds**

Mailing Address 1401 I St NW  
Ste 2

City Washington State DC Zip Code 20005-2225

FEC ID number of contributing federal political committee.

C

Name of Employer

MasterCard

Occupation

Bus. Leader, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-28-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. Tom Gannon**

Mailing Address 1401 I St NW  
Ste 2

City Washington State DC Zip Code 20005-2225

FEC ID number of contributing federal political committee.

C

Name of Employer

MasterCard

Occupation

Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-101-18-52**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **C. Ron Garrow**

Mailing Address 2000 Purchase St

City Purchase State NY Zip Code 10577-2405

FEC ID number of contributing federal political committee.

C

Name of Employer

MasterCard

Occupation

Group Head, Talent Acquisition, Manage

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-4-18-52**

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

450.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

Full Name (Last, First, Middle Initial)

**A. Sidney Gottesman**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing federal political committee.

C

Name of Employer

MasterCard

Occupation

Group Head, Technology Integration

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

Transaction ID : 20150710-78-18-52

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Maria Haluska**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing federal political committee.

C

Name of Employer

MasterCard

Occupation

Leader, Shareholder Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

Transaction ID : 20150710-83-18-52

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Sherri Haymond**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing federal political committee.

C

Name of Employer

MasterCard

Occupation

Business Leader, Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

Transaction ID : 20150710-36-18-52

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ▶

200.00

TOTAL This Period (last page this line number only)..... ▶



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

MasterCard International Inc. Employees' PAC

Full Name (Last, First, Middle Initial)

**A. Wendy House**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
 O Fallon MO 63368-7263

FEC ID number of contributing federal political committee.

C

Name of Employer

MasterCard

Occupation

Consultant, Business Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

Transaction ID : 20150710-9-18-52

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Greg Howes**

Mailing Address 7904 Tylerton Dr

City State Zip Code  
 Raleigh NC 27613-1555

FEC ID number of contributing federal political committee.

C

Name of Employer

MasterCard

Occupation

Global Solutions Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

Transaction ID : 20150710-62-18-52

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Benjamin Jankowski**

Mailing Address 2000 Purchase St

City State Zip Code  
 Purchase NY 10577-2405

FEC ID number of contributing federal political committee.

C

Name of Employer

MasterCard

Occupation

Group Head, Global Media

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1041.65

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

Transaction ID : 20150710-35-18-52

Amount of Each Receipt this Period

208.33

SUBTOTAL of Receipts This Page (optional)..... ►

358.33

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 39

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Gary Kearns**

Mailing Address 100 Manhattanville Rd

City	State	Zip Code
Purchase	NY	10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Group Executive, Information Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-100-18-52**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Joan Kelly**

Mailing Address 2200 Mastercard Blvd

City	State	Zip Code
O Fallon	MO	63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

SVP/Systems Enhancement Stratg

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-79-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Joe Khanna**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Business Leader, Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-84-18-52**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

## **A. Cliff Kinnunen**

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Consultant, Softw Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : 20150710-89-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Beth Kitchener**

Mailing Address 100 Manhattanville Rd

City

Purchase

State

NY

Zip Code

10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Bus Leader, Public Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : 20150710-86-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **C. Nora Kryza**

Mailing Address 900 Wilshire Dr  
Ste 302

City

Troy

State

MI

Zip Code

48084-1600

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Sr. Consultant, Business Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : 20150710-109-18-52**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Claire Le Gal**

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MasterCard

Business Leader, Fraud Management

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-66-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Dana Lorberg**

Mailing Address 2200 Mastercard Blvd

City

State

Zip Code

O Fallon

MO

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MasterCard

SVP/Global Operations Strategy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4050.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-20-18-52**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Michael Luchinsky**

Mailing Address 2000 Purchase St

City

State

Zip Code

Purchase

NY

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MasterCard

SBL Mergers & Acquisitions

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-3-18-52**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

250.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 39  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Raja Madabhushi**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Chief Marketing Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-91-18-52**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Tara Maguire**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Assistant Controller

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-119-18-52**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C. Michael Manchisi**

Mailing Address 5555 Winghaven Blvd

City	State	Zip Code
O Fallon	MO	63368-3625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

SVP/Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2912.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-32-18-52**

Amount of Each Receipt this Period

416.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

1016.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 22 OF 39  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. James Mandella**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Program Leader, Fraud Prevention Solut

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2015

**Transaction ID : 20150710-31-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Kimberly Martin**

Mailing Address 2200 Mastercard Blvd

City	State	Zip Code
O Fallon	MO	63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2015

**Transaction ID : 20150710-14-18-52**

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

**C. Jill Matson**Mailing Address 200 Bellevue Pkwy  
Ste 500

City	State	Zip Code
Wilmington	DE	19809-3741

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Account Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2015

**Transaction ID : 20150710-61-18-52**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

140.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 39  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. James McCarthy**

Mailing Address 5555 Winghaven Blvd

City State Zip Code  
O Fallon MO 63368-3625

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Senior Business Leader, Product Develo

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : 20150710-118-18-52**

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**B. Michael McEneney**

Mailing Address 2000 Purchase St

City State Zip Code  
Purchase NY 10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Deputy General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2333.31

Date of Receipt

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : 20150710-73-18-52**

Amount of Each Receipt this Period

333.33

Full Name (Last, First, Middle Initial)

**C. Chris McWilton**

Mailing Address 2000 Purchase St

City State Zip Code  
Purchase NY 10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2912.00

Date of Receipt

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : 20150710-106-18-52**

Amount of Each Receipt this Period

416.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

974.33

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 39

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Amy Milam**

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Product Leader, Product Account Suppor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7								1	5			

**Transaction ID : 20150710-112-18-52**

Amount of Each Receipt this Period

55.00

Full Name (Last, First, Middle Initial)

**B. Shawn Miles**

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Counsel Sr

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7								1	5			

**Transaction ID : 20150710-17-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C. Timothy Murphy**

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2912.00

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7								1	5			

**Transaction ID : 20150710-104-18-52**

Amount of Each Receipt this Period

416.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

571.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

## **A. Ruby Naskiewicz**

Mailing Address 239 Brookside Ave

City State Zip Code  
 Ridgewood NJ 07450-4630

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Business Leader, Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 16 / 2015

**Transaction ID : 45298328C2EA2775C91C**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

## **B. Nancy O'Malley**

Mailing Address 2000 Purchase St

City State Zip Code  
 Purchase NY 10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Chf Pymt Sys Integrity Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : 20150710-87-18-52**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **C. Karen Pascoe**

Mailing Address 114 5th Ave  
 FI 12

City State Zip Code  
 New York NY 10011-5608

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Group Head, User Experience Implementa

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 07 / 15 / 2015

**Transaction ID : 20150710-63-18-52**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

350.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 26 OF 39  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Larry Patterson**

Mailing Address W156N7711 Cherry Ct

City	State	Zip Code
Menomonee Falls	WI	53051-7453

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Account Leader - 501152

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-74-18-52**

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B. Chris Pitcher**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Finance Leader, Global Supply Manageme

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-69-18-52**

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C. Steve Potter**Mailing Address 9830 Colonnade Blvd  
Ste 170

City	State	Zip Code
San Antonio	TX	78230-2297

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Account Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-94-18-52**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

230.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

## **A. Craig Prior**

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Consultant, Project Mgmt

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : 20150710-40-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **B. Mike Prusaczyk**

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Senior Business Leader, Software Engin

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY  
07 / 15 / 2015

**Transaction ID : 20150710-81-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

## **C. Sarah Quinlan**

Mailing Address 69 Riverdale Ave  
Unit 404

City

Greenwich

State

CT

Zip Code

06831-5056

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Grp Hd Info Svcs Insights Vert

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

MM / DD / YYYY  
07 / 26 / 2015

**Transaction ID : 41308084BD8A60650AC1**

Amount of Each Receipt this Period

225.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

325.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 28 OF 39

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

## **A. Rob Reeg**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
O Fallon MO 63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

SVP/Systems Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2912.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 15 2015

**Transaction ID : 20150710-1-18-52**

Amount of Each Receipt this Period

416.00

Full Name (Last, First, Middle Initial)

## **B. Mike Rethorn**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
O Fallon MO 63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Information Tech

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 15 2015

**Transaction ID : 20150710-55-18-52**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

## **C. Len Sanker**

Mailing Address 424 Parkshire Place Dr

City State Zip Code  
Dardenne Prairie MO 63368-8344

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Business Leader, Software Engineering

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 20 2015

**Transaction ID : 4FBC870639E71FB8BFE2**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

616.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Eduardo Santos**

Mailing Address 801 Brickell Ave  
Ste 1300

City State Zip Code  
Miami FL 33131-2945

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Senior Business Leader, Public Policy

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-49-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Joe Schuler**

Mailing Address 2200 Mastercard Blvd

City State Zip Code  
O Fallon MO 63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Leader, Systems Programming

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

595.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-39-18-52**

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

**C. Eileen Simon**

Mailing Address 2000 Purchase St

City State Zip Code  
Purchase NY 10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Associate General Counsel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

07 / 15 / 2015

**Transaction ID : 20150710-114-18-52**

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

235.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 39  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Ashish Sinha**

Mailing Address 15 McGinnis St

City

East Brunswick

State

NJ

Zip Code

08816-2673

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Group Head, Portfolio Management - Mar

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 25 / 2015

**Transaction ID : 41B0B87BA49E835B8F66**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Jack Sinnott**

Mailing Address 801 Brickell Ave  
Ste 1200

City

Miami

State

FL

Zip Code

33131-2951

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Bus Leader, Sec & Risk Svcs

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

630.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : 20150710-7-18-52**

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

**C. Janet Smith**

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Business Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : 20150710-70-18-52**

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

190.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER: PAGE 31 OF 39  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Bella Stavchansky**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

General Manager, Eastern Europe

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : 20150710-121-18-52**

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

**B. Brian Swain**

Mailing Address 3481 Alta St

City	State	Zip Code
Yorktown Heights	NY	10598-1001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	29	/	2015

**Transaction ID : 48278DB452B2CFB3005F**

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

**c. Joseph Swezey**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

868.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-2-18-52**

Amount of Each Receipt this Period

124.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

391.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 39  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Jason Taylor**

Mailing Address 100 Manhattanville Rd

City State Zip Code  
Purchase NY 10577-2134

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Account Manager, Senior

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : 20150710-76-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Donna Terman**

Mailing Address 2000 Purchase St

City State Zip Code  
Purchase NY 10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Bus Resources-Communication

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : 20150710-19-18-52**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Frank Tufano**

Mailing Address 2000 Purchase St

City State Zip Code  
Purchase NY 10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Group Head Finance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2030.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 15 / 2015

**Transaction ID : 20150710-21-18-52**

Amount of Each Receipt this Period

290.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

490.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 39

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Timothy Tyler**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-27-18-52**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**B. Mark Valente**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Senior Business Leader, Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-5-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Jeroen Van Erven**

Mailing Address 152 Beach Road

City	State	Zip Code
Miami	FL	33131-4945

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Financial Analysis

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	31	/	2015

**Transaction ID : 20150710-122-18-52**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

325.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 39

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Gary Vonderhaar**

Mailing Address 2200 Mastercard Blvd

City	State	Zip Code
O Fallon	MO	63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Systems Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-113-18-52**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Susan Warner**

Mailing Address 2000 Purchase St

City	State	Zip Code
Purchase	NY	10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Senior Business Leader, WorldWide Comm

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1050.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-98-18-52**

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C. Timothy Westendorf**

Mailing Address 2200 Mastercard Blvd

City	State	Zip Code
O Fallon	MO	63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Financial Systems

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	15	/	2015

**Transaction ID : 20150710-57-18-52**

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

525.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 39

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Shirley White-Ellul**

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Consultant, Project Management

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2015

**Transaction ID : 20150710-23-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**B. Amy Winders**

Mailing Address 2200 Mastercard Blvd

City

O Fallon

State

MO

Zip Code

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

Sr. Consultant, Technology Account Man

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2015

**Transaction ID : 20150710-33-18-52**

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

**C. Mimi Wood**

Mailing Address 2000 Purchase St

City

Purchase

State

NY

Zip Code

10577-2405

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MasterCard

Occupation

VP/Human Resources

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

868.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2015

**Transaction ID : 20150710-43-18-52**

Amount of Each Receipt this Period

124.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

224.00

**TOTAL** This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 39

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Kent Young**

Mailing Address 2200 Mastercard Blvd

City

State

Zip Code

O Fallon

MO

63368-7263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

MasterCard

VP/Business Management

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

910.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		1	5		2	0	1	5		

**Transaction ID : 20150710-50-18-52**

Amount of Each Receipt this Period

130.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

130.00

**TOTAL** This Period (last page this line number only)..... ►

15656.66

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 39

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address 411 King St.

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement  
Merchant Fees

Candidate Name

001

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07      02      2015
**Transaction ID : DC702028EFCDF4A8C82**

Amount of Each Disbursement this Period

269.65

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City      State      Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City      State      Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type
Office Sought:    ☐ House  
                         ☐ Senate  
                         ☐ President

State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

269.65

269.65

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Donnelly for Indiana**

Mailing Address 1050 17th St NW Ste 590

City Washington	State DC	Zip Code 20036
--------------------	-------------	-------------------

Purpose of Disbursement  
2018 Primary

011

Candidate Name

**Joseph Simon Donnelly Sr.**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2015

**Transaction ID : 674456EF749F9A9325B**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Jeff Flake for US Senate Inc**

Mailing Address PO Box 12512

City Tempe	State AZ	Zip Code 85284-0042
---------------	-------------	------------------------

Purpose of Disbursement  
2018 Primary

011

Candidate Name

**Jeffrey Lane Flake**Category/  
Type

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2018

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2015

**Transaction ID : 5FC46D5B5124090AE10**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Olson for Congress Committee**

Mailing Address PO Box 16381

City Sugar Land	State TX	Zip Code 77496-6381
--------------------	-------------	------------------------

Purpose of Disbursement  
2016 Primary

011

Candidate Name

**Peter Graham Olson**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 22

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2015

**Transaction ID : 39D8FF1E008233C503B**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**MasterCard International Inc. Employees' PAC**

Full Name (Last, First, Middle Initial)

**A. Project West Political Action Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2015

Mailing Address 9227 East Lincoln Avenue #200-435

City	State	Zip Code
Lone Tree	CO	80124

Purpose of Disbursement  
2015 Contribution

011

**Transaction ID : A7132580A07DC33AE3B**

Amount of Each Disbursement this Period

2000.00
---------

Candidate Name

**Project West Political Action Committee**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2015
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Contribution

State: District:

Full Name (Last, First, Middle Initial)

**B. The Oorbeek Group**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2015

Mailing Address 2101 Wilson Blvd.  
Suite 610

City	State	Zip Code
Arlington	VA	22201

Purpose of Disbursement  
2015 Contribution

011

**Transaction ID : VED5525CD61AD9406952**

Amount of Each Disbursement this Period

650.00
--------

Candidate Name

**Patrick Timothy McHenry**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NC District: 10

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2650.00
5650.00